

PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

04/18/2001 RHARIS1 00000012 09835232

01 FC:201	355.00 OP
02 FC:202	40.00 OP

PTO-1556
(5/87)

04/12/01



JC879 U.S. PTO

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Guy Beardsley

Printed name of person mailing correspondence

Signature of person mailing correspondence

JC885 U.S. PTO

09/835232



04/12/01

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)

Attorney Docket Number	00383/052002
Applicant	Philip Leder and Benjamin Leader
Title	FORMIN-2 NUCLEIC ACIDS AND POLYPEPTIDES AND USES THEREOF

PRIORITY INFORMATION:

This application claims benefit from U.S. Provisional application serial no. 60/196,811, filed April 13, 2001 (now pending), hereby incorporated by reference.

SMALL ENTITY STATUS:


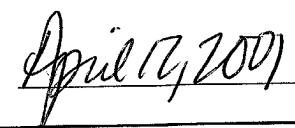
☒ Applicant claims small entity status under 37 C.F.R. § 1.27.

APPLICATION ELEMENTS:

Cover sheet	1 page
Specification	44 pages
Claims	1 page
Abstract	1 page
Drawing	122 sheets
Combined Declaration and POA, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	2 pages
Sequence Statement	[**] pages
Sequence Listing on Paper	[**] pages
Sequence Listing on Diskette	[**] disk
Small Entity Statement, which is: <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and such small entity status is still proper and desired.	[**] pages

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Preliminary Amendment	[**] pages
IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee:\$355	\$355.00
Excess Claims Fee: 6 - 20 x \$9	\$****
Excess Independent Claims Fee: 4 - 3 x \$40	\$40.00
Multiple Dependent Claims Fee: \$270/\$135	\$****
Total Fees:	\$395.00
<input checked="" type="checkbox"/> Enclosed is a check for \$395.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
CORRESPONDENCE ADDRESS:	
Kristina Bieker-Brady, Ph.D. Reg. No. 39,109 Clark & Elbing LLP 176 Federal Street Boston, MA 02110 <div style="text-align: right;"> Telephone: 617-428-0200 Facsimile: 617-428-7045 </div>	
CUSTOMER NO: 21559	
Signature 	Date 

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